



PTO/SB/81 (04-05)

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	08/466,219
Filing Date	June 6, 1995
First Named Inventor Michael HANDFIELD	
Title	TIRE MONITORING VIA AN ELECTROMAGNETIC PATH INCLUDING THE GROUND PLAN OF A VEHICLE
Art Unit	2214
Examiner Name	W. L. Den
Attorney Docket No.	555842001400

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioners associated with the Customer Number: **25225**

OR

 Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/or attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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 The address associated with Customer Number:

OR

 Firm or Individual Name:
Address: City: State: Zip: Country: Telephone: Email:

I am the:

 Applicant/inventor:

 Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(d) is enclosed. (Form P20/SB/96)

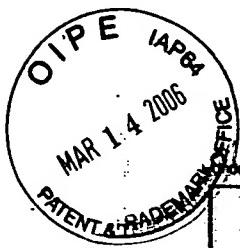
SIGNATURE of Applicant or Assignee of RecordSignature: **Michael Handfield**Date: **3-9-06**Name: **Michael Handfield**Telephone: **(248) 651-5941**Title and Company: **Inventor**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of **2** forms are submitted.
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Application Number	08/466,219
Filing Date	June 6, 1995
First Named Inventor	Michael HANDFIELD
Title	
TIRE MONITORING VIA AN ELECTROMAGNETIC PATH INCLUDING THE GROUND PLAN OF A VEHICLE	
Art Unit	2214
Examiner Name	W. L. Cen
Attorney Docket No.	555642001400

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Individual Name:

Address:

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State:

Zip:

Country:

Telephone:

Email:

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record:

Signature	<i>Helene Laliberte</i>	Date	3-9-06
Name	Helene Laliberte	Telephone	(348)651-5941
Title and Company	Inventor		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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